									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								108232					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER		
TOTAL CLAIMS			24.7				ſ	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		Ì	BASIC F	EE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			72minus 20=		-22			X\$ 9=		OR	X\$18=	74	
INDEPENDENT CLAIMS			6 minus 3 = "		*3		ł	X43=		1	X86=	3/0 05X	
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				ŀ	······		OR		250	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	+145=		OR	+290=	01	
							•	TOTAL	·	OR	TOTAL	1,469	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALI	_ ENTITY	OR	OTHER SMALL		
4		CLAIMS REMAINING		HIGH! NUME	EST BER	PRESENT	Γ		ADDI- TIONAL]	RATE	ADDI- TIONAL	
AMENDMENT A		AFTER AMENDMENT		PREVIC PAID I		EXTRA		RATE	FEE		HAIE	FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
L`	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=		
							L	TOTA	L	┨┈╏	TOTAL		
		(Column 1)		(Colun		(Column 3)	Α	DDIT. FE	E	JOR ,	ADDIT. FEE!		
_		CLAIMS		HIGH	EST		lг		ADDI-	1 1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIC PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
	Total		Minus	**	<u> </u>	=		X\$ 9=	1	OR	X\$18=		
	Ind pendent	*	Minus	***		=		X43=		1 1	X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						▎┠		<u> </u>	OR			
							L	+145=	ļ	OR	+290=		
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	,	
	Independent	*	Minus	***		=	-	X43=		l . I	X86=	•	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7.10-	1 -	OR			
* 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+145= TOTAL		OR	+290=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					r foun	d in the a	opropriate bo	x in col	ımn 1		